

## POLICY ON RECORDING CLASS LECTURES

This Policy sets forth the internal guidelines and requirements for the recording (audio, video and streaming) by University faculty or staff of class lectures (including guest presentations).

Except for approved accommodations under the Americans with Disabilities Act or as the University may otherwise explicitly approve in writing, students may not record a classroom lecture.

This Policy is intended to ensure compliance with Family Education Rights and Privacy Act (FERPA).

- Lectures may only be recorded with the permission of the faculty member/presenter and all the students present at the lecture.
  - Faculty/Presenter consent should be obtained in writing (attached).
  - Student consent will be implied if: (i) **both** the course description and syllabus includes the following notice: “Please be aware that the University may record lectures. If a recording is made available to students, they may only use it for their personal academic use and may not share, display, distribute, publish or copy the recording.”, **and** (ii) the faculty member (or other University administrator or staff) also provides this notice (orally or in writing) to the students on or about the first day of class (but in any event prior to the first recording taking place.) If all of these notices are not given, a signed consent form (attached) must be obtained from each student present at the lecture before the recording may be used. (If the student is not at least 18 years of age, his/her parent/guardian must provide the consent.)
- Recorded lectures should be made available only to the students enrolled in the course for their personal academic use (unless otherwise expressly authorized by the Office of the General Counsel).
- Students are prohibited from sharing, displaying, distributing, publishing or copying any recorded lecture.
- Installation of any video camera may be done only by the University’s Security Department, in consultation with the IT Academic Systems Committee. To the extent practicable, the video camera should be focused on the faculty member/presenter, and not the students.
- Recordings should be deleted after one (1) year. Faculty or staff who made the recording are responsible for ensuring this deletion.
- To the extent practicable, the faculty member/presenter should refrain from identifying students by their names.
- Violators of this Policy will be subject to appropriate discipline, up to termination of employment (in the case of faculty and staff) and suspension or dismissal (in the case of students.)
- Please consult with Dr. Timothy Stevens (timothy.stevens@yu.edu) if you have any questions regarding this Policy.



**STUDENT CONSENT TO CLASSROOM RECORDING**

**To:** Yeshiva University  
500 West 185th Street  
New York, NY 10033

**From:** \_\_\_\_\_

Student's First Name	Middle Initial	Last Name	
Address	City	State	Zip Code
Student ID #	Email		

**Re:** Course Name: \_\_\_\_\_ Course #: \_\_\_\_\_

Semester: \_\_\_\_\_ Professor: \_\_\_\_\_

I hereby grant permission to the University to take photographs, audio and/or videotapes or recordings, motion pictures or digital images (“Recording”) of me in connection with my participation in the above-referenced course (such as when I may make a presentation or ask questions), and to use and publish the Recording (in whole or in part) for such purposes and in any medium as the University may deem proper, including, but not limited to, training, publicity, promotional and educational purposes. In granting such permission, I waive any right to inspect or approve the Recording, and hereby relinquish all of my rights, title and interests in the Recording and grant the University the perpetual right to use, publish and reproduce the Recording without compensation, royalty or other charge.

I understand that the Recording may contain my education records, and I hereby grant permission to the University to release them as provided above.

I acknowledge that I am 18 years of age or older, and I have read this document before signing below and fully understand the contents, meaning and impact of this document.

I understand and acknowledge that I am giving up legal rights I might otherwise have, and that I have signed this document knowingly and voluntarily and it is not a condition or requirement of my coursework at the University.

Signature of Student : \_\_\_\_\_ Date: \_\_\_\_\_